

For Business Office Use

Appl. Fee Paid _____
Date of Pmt. _____
Receipt No. _____

Application For Admission

BREWER STATE JUNIOR COLLEGE
FAYETTE, ALABAMA 35555

Social Security No. _____
Date of Application _____

Have you previously submitted an application to Brewer State Junior College? _____

Mr. _____
Miss. _____
Mrs. _____
Last Name First Middle

Mailing Address _____
Street or RFD City State Zip Code

Date of Birth _____ Age _____ Place of Birth _____
Sex _____ Race _____ Religious Preference _____ Telephone No. _____
Marital Status _____ Spouse's Name _____

Parent's Name (Or Guardian) _____

Parent's Address (Or Guardian) _____
Street or RFD City State Zip Code

Are you a Veteran? Yes _____ No _____ Selective Service Number _____

Classification: Freshman () Sophomore () Transfer () Graduate () Other ()

Desired Enrollment: Fall () Winter () Spring () Summer () 19 _____

Do you plan to attend: Part time () Full time () Day () Night () Extension Courses ()

High Schools Attended: _____
Name Location (City, County, State) Graduation Date

_____ Name Location (City, County, State) Graduation Date

Previous Colleges Attended: _____
Name Location Dates of Attendance

_____ Name Location Dates of Attendance

Are you on academic or social probation or suspension from another college? _____

If yes, please specify: _____

Program of Study: _____ Do you plan to teach? Yes _____ No _____
(Major)

College you plan to attend after leaving Brewer State? _____

Return to:

Office of Admissions
Brewer State Junior College
Fayette, Alabama 35555

Signature of Applicant

ADMISSION FORMS AND PROCEDURES
Brewer State Junior College
Fayette, Alabama 35555

I. Programs for credit (Day or Evening, Full Time or Part Time)

1. Complete the Student Health Form. All blanks must be completed and signed by the applicant and his parents or guardian,
2. Complete the Application for Admission.
 - a. All blanks must be completed.
 - b. A \$5.00 application processing fee must accompany the Application for Admission. (This is non-refundable.)
3. Request that the high school from which you graduated mail a copy of your transcript of your scholastic record directly to the Office of Admissions, Brewer State Junior College, Fayette, Alabama. (If you are now in high school, you may be tentatively admitted by having a transcript of all work completed sent to Brewer State.)
4. TRANSFER STUDENTS must request that official transcripts from each college previously attended be mailed to Brewer State.
5. Students may be admitted on basis of GED test. Present high school equivalency certificate and GED scores along with application for admission.

II. Audit Programs (Day or Evening)

1. Complete the Application for Admission.
2. Return the completed forms with the \$5.00 application processing fee to Office of Admissions, Brewer State Junior College, Fayette, Alabama 35555.

STUDENT HEALTH FORM
Brewer State Junior College

Name _____
Last First Middle

Person who may be contacted in case of emergency:

Name _____ Relation to applicant _____

Business Address _____ Telephone _____

Home Address _____ Telephone _____

Do you have any chronic health problem that requires observation or continued treatment? Yes _____ No _____ If yes, have a physician's summary of the illness forwarded with this health form.

Have you ever had any restriction placed upon the amount or nature of your exercise?

Yes _____ No _____. If yes, please explain _____

Physical education exemptions must be accompanied by a doctor's statement.

The above information is correct and accurate to the best of my knowledge.

Date _____ Applicant's Signature _____

Signature of Parent or Guardian